



Commonwealth
of Massachusetts

File with: City or Town Clerk or Election Commission

Amended

Form CPF M 102A: Amendment to Campaign Finance Report
Municipal Form
Office of Campaign and Political Finance

OCT 18 10:18 PM '18
REC'D AMHERST TOWN CLERK

Report Being Amended: Year: 2018 Reporting Period: Beginning Date: 8/27/2018 Ending Date: 10/4/2018

☐ 8th day preceding preliminary ☐ 8th day preceding election ☒ 30 day after election ☐ year-end report ☐ dissolution

Dillon Maxfield

Candidate Full Name (if applicable)

290 North Pleasant St, Amherst, MA, 01002

Residential Address

Council-At-Large of Amherst, MA

Office Sought and District

E-mail: _____

Phone # (optional): _____

Committee to Elect Dillon Maxfield

Committee Name

Samantha Levreault

Name of Committee Treasurer

544 Old Post Road, Worthington, MA, 01098

Committee Mailing Address

E-mail: _____

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$250.40
Line 2: Total receipts this period	\$105.00
Line 3: Subtotal	\$355.40
Line 4: Total expenditures this period	\$355.40
Line 5: Ending Balance	\$0.00
Line 6: Total in-kind contributions this period	\$8.99
Line 7: Total (all) outstanding liabilities	\$0.00
Line 8: Name of bank(s) used: <u>Florence Savings Bank</u>	

The original filing of the above-referenced campaign finance report is being amended for the following reason(s):

Report listed as "2018 Other Report (MUN)" rather than "30 day after election" report

Incorrect candidate address/Committee name listed on forms

- Address listed as 240 rather than 290
- Committee name listed as "Dillon Maxfield" rather than "The Committee to Elect Dillon Maxfield"

Reimbursement for Keith Toffling not properly listed under section R-1

Receipts and expenditures of \$50 or less have now been itemized

Signed under the penalties of perjury:

Signed under the penalties of perjury:

(Candidate's signature)

Date: 10/11/2018

(Treasurer's signature)

Date: 10/9/18

Schedule A: Receipts

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

<u>Date</u>	<u>Name and Residential Address</u>	<u>Amount</u>	<u>Occupation and Employer</u>
8/31/2018	Galonek, William 19 Shepard Road Sturbridge, MA 01518	\$30.00	N/a N/a
8/29/2018	Glass, Jedidiah 171 Lake St. Waltham, MA 02154	\$25.00	N/a N/a
8/31/2018	Rubin, Mark 321 Broken Oak Loop Eugene, OR 97405	\$50.00	N/a N/a
Total Itemized Receipts:		\$105.00	
Total Unitemized Receipts:		\$0.00	
Total Receipts:		<u>\$105.00</u>	

Schedule B: Expenditures

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures over \$50 and under may be added together from committee records, and reported on line 13.

<u>Date</u>	<u>Name and Address</u>	<u>Amount</u>	<u>Purpose</u>
9/2/2018	Actblue 366 Summer St. Somerville, MA 02143	\$4.16	Processing Fee Dillon Maxfield
8/28/2018	Dillon Maxfield 290 North Pleasant Amherst, MA 01002	\$8.99	Reimbursement (See R-1)
9/27/2018	Keith Toffling 56 Blue Meadow Rd Belchertown, MA 01007	\$182.87	Reimbursement (See R-1)
8/28/2018	Sunraise Printing 322 Russell St. Hadley, MA 01035	\$159.38	Lawn Signs
Total Itemized Expenditures:		\$355.40	
Total Unitemized Expenditures:		\$0.00	
Total Expenditures:		<u>\$355.40</u>	

Schedule C: "Inkind" Contributions

Please itemize contributors who have made inkind contributions of more than \$50. In-kind contributions \$50 and under may be added together, from the committee's records, and included in line 16. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

<u>Date</u>	<u>Name and Residential Address</u>	<u>Value</u>	<u>Description, Occupation & Employer</u>
8/28/2018	Maxfield, Dillon 290 North Pleasant Apt. 2 Amherst, MA 01002	\$8.99	N/a N/a Name Badges
Total Itemized In-kind Contributions:		\$8.99	
Total Unitemized In-kind Contributions:		\$0.00	
Total In-kind Contributions:		<u>\$8.99</u>	

Schedule R: Reimbursements

<u>Date</u>	<u>Reimbursee</u>	<u>Total Amount</u>
8/28/2018	Dillon Maxfield	\$8.99
9/27/2018	Keith Toffling	\$182.87



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Form CPF R1: Itemization of Reimbursements
Office of Campaign and Political Finance

File with: Director
Office of Campaign and Political Finance
One Ashburton Place Rm. 411
Boston, MA 02108
(617) 979-8300

CPF ID# 17078

<u>Dillon Maxfield</u> <i>Individual Being Reimbursed</i>	<u>Dillon Maxfield</u> <i>Committee Name</i>
<u>\$8.99</u> <i>Amount of Reimbursement</i>	<u>8/28/2018</u> <i>Date of Reimbursement</i>

<u>Date</u>	<u>Name And Address</u>
9/27/2018	Dillon Maxfield 290 North Pleasant Amherst, MA 01002

<u>Amount</u>	<u>Purpose</u>
\$8.99	Reimbursement for Name Tags



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<u>Keith Toffling</u> <i>Individual Being Reimbursed</i>	<u>Dillon Maxfield</u> <i>Committee Name</i>
<u>\$182.87</u> <i>Amount of Reimbursement</i>	<u>9/27/2018</u> <i>Date of Reimbursement</i>

Date Name And Address
9/27/2018 **Keith Toffling**
56 Blue Meadow Rd
Belchertown, MA 01007

Amount Purpose
\$182.87 Reimbursement For Website